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APPLICANTS

Devis Iellici, CAMBRIDGE, UNITED KINGDOM;
 Simon Phillip Kingsley, Cambridge, UNITED KINGDOM;
 James William Kingsley, Cambridge, UNITED KINGDOM;
 Steven Gregory O'Keefe, Queensland, AUSTRALIA;

**** CONTINUING DATA *******

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**** FOREIGN APPLICATIONS *******

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**** IF REQUIRED, FOREIGN FILING LICENSE GRANTED *** SMALL ENTITY ****

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Foreign Priority claimed	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Met after Allowance	STATE OR COUNTRY	SHEETS DRAWINGS	TOTAL CLAIMS	INDEPENDENT CLAIMS
35 USC 119(a-d) conditions met	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<u>Initials</u>	UNITED KINGDOM	8	-29 27	1

ADDRESS

Pearl Cohen Zedek Latzer, LLP
 1500 Broadway
 12th Floor
 New York, NY 10036
 UNITED STATES

TITLE

Antenna for mobile telephone handsets, pdas, and the like

FILING FEE RECEIVED 700	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit